

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1.	DATE OF REPORT 2 NAM	EOFCANDIDATEOF	RCOMMITIFF					
	,2.a	Coppinger						
2.b.	IF COMMITIEE, NAME OF CANDIDATE			,3. ELECTION DATE				
				August 2, 201	2			
4.a.	CAMPAIGN ADDRESS AND PHONE Street or Rural Route City		State	Zip Code	Phone			
	212 Masters Road Hixson		TN	37343	(423) 843-1739			
4.b.	CANDIDATE'S HOME ADDRESS (if different than 4.a.)		111		(123) 013 1737			
	Street or Rural Route City Same as above		State	Zip Code	Phone			
5.	OFFICE SOUGHT (include district number, if applicable)	6. NAME	ME OF POLITICAL TREASURER (may be candidate)					
	Hamilton County Mayor		Roy Kincer					
7.	CATEGORY OR REPORT (Check one)	ъ	_					
	D D D D FIRST SECOND THIRD FOUR		D PRE-	MID-YEAR	D YEAR-END			
B.a.	QUARTER QUARTER QUAR BEGINNING DATE OF REPORTING PERIOD		GENERAL NG DATE OF REPO	SUPPLEMENTAL PRINGPERIOD	SUPPLEMENTAL			
	January 16, 2013	June	June 30, 2013					
9. (Check one)	Julia	2012					
	a. ${\bf D}$ This campaign is exempt from detailed disclosure	because contribution	ns (including in-ki	nd) received total \$1,000	or less AND expendi-			
	tures total \$1,000 or less for this reporting period.							
	b. DThis campaign is required to file a detailed financia	al disclosure becaus	e contributions (in	ncluding in-kind) received	total more than \$1,000			
	and/or expenditures total more than \$1,000 for this	reporting period.						
10	1/we do salemply swear or affirm that the information or	entained in this come	naign financial dia	alogura raport in true and	I that this report is an			
10.	10. 1/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign							
	Financial Disclosure Act Additionally, 1/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.							
	D. W. C 5	1 -		1/.	, ,			
1-m. copping 7/14/13 Koy Kincer 7/14								
	signature of candidate date		signature	of political treasurer	date			
11	WITNESS SIGNATURE							
	· · · · · · · · · · · · · · · · · · ·		Mill	1. 11/	7/11/12			
	Nina Corringer 7/16	1113 V	1 Wishel	le Uskincer) 1/14/13			
	signature of witness date		signa	ture of witness	date			
12.	SUMMARY							
	a. BALANCE ON HAND LAST REPORT			\$ 37,825.79				
				0				
	b. TOTALRECEIPTSTHISPERIOD			\$				
	c. TOTALDISBURSEMENTSTHISPERIOD			\$ 3,462.59				
	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)			\$ <u>-</u>	34,363.20			
	e. TOTAL LOANS OUTSTANDING	4		\$_	0			
	72:8 M	1 51 1111 81			0			
	f. TOTALOBLIGATIONSOUTSTANDING	SSIWWOO		\$	0			
	NI CO I	48 [][MA]]						

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIO							
Jim Coppinger	FROM: 1/16/13 TO: 6/30/13							
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)								
a. Unitemized Contributions (\$100 or less from each source this period)	\$0							
b. Itemized Contributions (over \$100 from each source this period)	\$0							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$0							
16. LOANS RECEIVED THIS REPORTING PERIOD	\$0							
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$0							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$0_							
DISBURSEMENTS								
19. EXPENDITURES (other than loan payments)								
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)							
\$0								
\$								
\$								
\$								
\$								
\$								
\$								
\$								
\$								
Total of Expenditures (\$100 or less each payee)	\$ 0							
b. Itemized Expenditures (Over \$100 each payee this period)								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)								
20. LOAN REPAYMENTS MADE THIS PERIOD								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)								
22.IN-KIND CONTRIBUTIONS								
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$0							
İtemized in-kind contributions (over \$100 from each source this period)	\$0							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)								
23. OBLIGATIONS								
a. Unitemized Obligations Outstanding (\$100 or less each)	\$							
b. Itemized Obligations Outstanding (Over \$100 each)\$								
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)								

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD					
Jim Coppinger	TO: 6/30/13							
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount \$0.00							
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name Middle Name		ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Hamilton County Republican F								
Address 1428 Chestnut Street, Suite E								
Chattanooga	State TN	Zip Code 37402	Lincoln Day Dinner		\$1,200.00			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Morton's Steakhouse								
Address			-					
618 Church Street	Laur	Tara	_					
c _{ity} Nashville	State TN	Zip Code 37219	Dinner for Tennes	see Delegation	\$2,262.59			
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code	1					
First Name Mi		ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address		n						
City	State	Zip Code						
First Name Middle Name		ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name			1					
Address								
City	State	Zip Code	7					
First Name Middle Name		ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name		1						
Address								
City	State	Zip Code		_				
5. TOTAL ITEMIZED EXPENDITURES								
(Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus	\$3,462.59							